

**DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or a joint inventor (if plural names are listed below) of the invention entitled

**COMPOSITIONS AND METHODS FOR THE PREVENTION OR  
TREATMENT OF CANCER AND BONE LOSS ASSOCIATED WITH  
CANCER**

which is described and claimed in the specification which:

- ☒ is attached hereto.  
☐ was filed on \_\_\_\_\_  
as Application Serial No. \_\_\_\_\_  
and was amended on \_\_\_\_\_ (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

**Power of Attorney:** As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Ron K. Levy, Registration No.: 31,539, Steven M. Odre, Registration No.: 29,094, and Robert B. Winter, Registration No.: 34,458, said attorney(s)/agent(s) to have in addition full power of revocation, including the power to revoke any power herein granted.

Please send all future correspondence to:

U.S. Patent Operations/RBW  
Dept. 430, M/S 27-4-A  
AMGEN INC.  
One Amgen Center Drive  
Thousand Oaks, California 91320-1799

Direct Telephone Calls To:

Robert B. Winter  
Attorney/Agent for Applicant(s)  
Registration No.: 34,458  
Phone: (805) 447- 2425

**EXPRESS MAIL CERTIFICATE**

\*Express Mail\* mail labeling number: EL198792573US

Date of Deposit: September 3, 1999

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. 1.10 on the date indicated above and is addressed to Box Patent Application, Assistant Commissioner for Patents, Washington, DC 20231.

Chris Gutierrez  
Printed Name

Chris Gutierrez  
Signature

**DECLARATION AND POWER OF ATTORNEY (cont'd)**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full Name of Inventor: COLIN R. DUNSTAN

Inventor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence and  
Post Office Address: 887 Tupelo Wood Court, Thousand Oaks, CA 91320 USA  
(Address, City, State, Zip Code, Country)

Citizenship: Australia